



TRANSGENDER HEALTH INSURANCE GUIDE TO THE MARKETPLACE



ILLINOIS 2018

Looking for health insurance for 2018 through HealthCare.gov? We've created new state-specific Transgender Health Insurance Guides to help you better understand your options and select a plan that meets your needs and fits your budget.

- To see our analysis of **transgender exclusions** in silver plans sold through HealthCare.gov, check out: [Transgender Health Insurance Guide for 2018: Illinois](#). These ratings were compiled by Out2Enroll through a review of silver marketplace plans only. Out2Enroll did not contact insurance companies to verify this information. In addition, plans may have other exclusions (such as cosmetic exclusions) that may impact your coverage so you should carefully review each plan to ensure it meets your needs. Not all insurers offer coverage in all areas of the state so carefully review the options in your area.
- To see more **detailed information about each silver plan**, check out the documents below. Insurance companies are listed in **bold** and we have included links to each plan's specific **Summary of Benefits & Coverage** (a summary of plan features and out-of-pocket costs) and **Evidence of Coverage** (detailed plan information that includes coverage exclusions and limitations). Transgender and cosmetic exclusions will only be found in the Evidence of Coverage documents. We strongly recommend that you review both of these documents before selecting a 2018 marketplace plan.

If you still have questions about choosing a plan, we can help. Make an appointment with an [LGBT-friendly expert](#) who can help you consider your options and enroll for free.

BlueCross BlueShield of Illinois

Blue Precision Silver HMO 206	Summary of Benefits & Coverage	Evidence of Coverage
BlueCare Direct Silver 212 with Advocate	Summary of Benefits & Coverage	Evidence of Coverage
Blue Choice Preferred Silver 203	Summary of Benefits & Coverage	Evidence of Coverage
Blue FocusCare Silver 210	Summary of Benefits & Coverage	Evidence of Coverage

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Cigna

Cigna Connect 4000	Summary of Benefits & Coverage	Evidence of Coverage
Cigna Connect 3400	Summary of Benefits & Coverage	Evidence of Coverage

Health Alliance Medical Plans

HMO 3100 Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 3100 Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 3100 OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 3500a Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 3500a Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 3500a OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 4000b Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 4000b Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 4000b OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 5000c Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 5000c Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 5000c OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO 7350 Riverside Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO HSA 3250 Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO HSA 3250 Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
HMO HSA 3250 OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 3500a Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 3500a Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable

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POS 3500a OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 6300 Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 6300 Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 6300 OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 6300 Riverside Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 7350 Elite Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 7350 Methodist Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 7350 OSF Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable
POS 7350 Riverside Silver	Summary of Benefits & Coverage	Evidence of Coverage - unavailable

Ambetter Balanced Care

Ambetter Balanced Care 1 (2018): IlliniCare Health Network	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 2 (2018): IlliniCare Health Network	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 3 (2018): IlliniCare Health Network	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 12 Standardized (2018): IlliniCare Health Network	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 4 (2018): IlliniCare Health Network	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 1 (2018) + Vision + Adult Dental: IlliniCare Health	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 2 (2018) + Vision + Adult Dental: IlliniCare Health	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 3 (2018) + Vision + Adult Dental: IlliniCare Health	Summary of Benefits & Coverage	Evidence of Coverage

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